# MODULE 4

## POSITIONING THE ADULT PATIENT

Introduction

One of the basic procedures that nursing personnel perform most frequently is that of changing the patient's position.

Any position, even the most comfortable one, will become unbearable after a while. Whereas the healthy person can move at will, the sick person's movements may be limited by disease, injury, or helplessness.

***Introductory points to note;***

- It is often the responsibility of the practical nurse to position the patient and change his position frequently
- Once the patient can ambulate, certain precautions must be taken to ensure the patient's safety.

***After completing this lesson, you should be able to:***

- List reasons for changing the position of a patient.
- Describe basic principles for positioning and turning patients.
- Describe techniques for maintaining proper body alignment of the patient lying on his/her back.
- Describe positions used when positioning a patient.
- List steps used to adjust the backrest and pillows of a patient in a patch bed.

***Additionally, after completing this lesson, the learner should be able to:***

- Describes actions that can be taken by a nurse to alleviate discomfort and promote relaxation of a patient.
- Cite rationales for getting a patient out of bed.
- Identify principles for assisting patients out of bed.
- Identify steps used in preparing to ambulate a patient and the stages of ambulation.
- Identify actions, which should be taken if a patient begins to fall.

***The following are reasons for changing a patient's position:***

- ✓ To restore body function
- ✓ Changing positions improves gastrointestinal function and improves respiratory function by allowing for greater lung expansion and relieving pressure in the diaphragm.
- ✓ To promote comfort and relaxation.
- ✓ To prevent deformities

When one lies in bed for long periods, muscles become atonic and atrophy.

***The following are reasons for changing a patient's position;***

- To promote comfort and relaxation.
- To relieve pressure and prevent strain (which leads to the formation of decubiti).
- To stimulate circulation.
- To give treatments (that is), range of motion exercises).
- Do not use special devices (that is., splints, traction) unless ordered. Ask if you do not know that is allowed.
- Maintain good patient body alignment.
- Think of the patient in bed as though he were standing. Reassure the patient to promote comfort and cooperation.
- A physician's order, such as one of the following, is needed for the patient. Maintain the patient's safety.
- Properly handle the patient's body to prevent pain or injury.

***Additional points to note;***

- Keep in mind proper body mechanics for the practical nurse.
- Obtain assistance, if needed, to move heavy or helpless patients.
- Follow specific physician's orders.

Sometimes the physician will specify how often to turn a patient.

***General Principles for Turning the Adult Patient are as follows.***

- ✓ The patient should be rotated through forpositions (unless contraindicated).
- ✓ If the patient experiences pain while turning, a quarter turn will be less painful than a half turn.
- ✓ Certain conditions may also make it impossible to turn the patient.
- ✓ Plan a schedule for turning the patient and follow it.

Record the position changes each time to ensure that all positions are used.

***An example of a schedule for turning would be as follows;***

| | |
|---|---|
| 10 a.m | Prone position |
| 12 p.m. | Left Sim's position |
| 2 p.m | Supine position |
| 4 p.m. | Right Sim's position |
| 6 p.m. | Prone position |

Supine

Prone

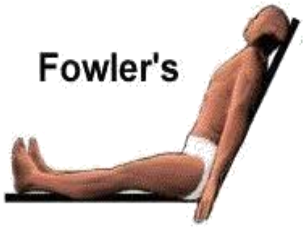
Right Lateral Recumbent

Left Lateral Recumbent

- Certain conditions may make it impossible to turn the patient as follows;
- Turning may be impossible if the patient has fractures that require traction appliances.
- Turning may be harmful to patients with spinal injuries.

In these cases, you need to rub the back by lifting the patient slightly off the bed and massaging with your hand held flat.

- You may want to turn a patient only to wash or rub the back or change the bed.



Fowler's

Additionally, Skin Breakdown may make it difficult

to turn the patient: -

Trendelenberg

- ✓ It is especially important to prevent skin breakdowns in the person who lies on his back for long periods.
- ✓ For the initial development of skin breakdown, a patient does not have to lie on his back for long periods, especially if moisture and sheet wrinkles are present.

Description

- Logrolling is a technique used to turn a patient whose body must at all times be kept in a straight alignment (like a log).
- This technique is used for the patient who has a spinal injury.
- Logrolling is used for the patient who must be turned in one movement, without twisting.
- Logrolling requires two people, or if the patient is large, three people.

***Techniques for logrolling a patient are as follows;***

- ✓ Wash your hands.
- ✓ Provide privacy.
- ✓ Approach and identify the patient (by checking the identification band) and explain the procedure (using simple terms and pointing out the benefits).
- ✓ Position the bed.
- ✓ The bed should be in a flat position at a comfortable working height.
- ✓ Lower the side rail on the side of the body at which you are working.
- ✓ Position yourself with your feet apart and your knees flexed close to the side of the bed.

***Additional Logrolling techniques are as follows:***

- Fold the patient's arms across his chest.
- Place your arms under the patient so that a major portion of the patient's weight is centered between your arms.
- The arm of one nurse should support the patient's head and neck.
- On the count of three, move the patient to the side of the bed, rocking backward on your heels and keeping the patient's body in correct alignment.
- Raise the side rail on that side of the bed.
- Move to the other side of the bed.

***Steps to ensure patient's comfort and safety when positioned;***

- Provide for the patient's comfort and safety.
- Position the call bell.
- Place personal items within reach.
- Be sure the side rails are up and secure.
- Report and record as appropriate.

***Common Positions Used when Ambulating***

**Placing the Patient in the Supine Position**

- Wash your hands.
- Collect equipment.
- Pillows.
- Approach and identify the patient (by checking the identification band) and explain the procedure (using simple terms and pointing out the benefits). Positioning aids as indicated.
- Provide privacy throughout the procedure.
- Position the bed.
- Place the bed in a flat or level position at working height, unless contraindicated.
- Lower the side rails on the proximal side (as necessary)

**Procedure for supine position**

- Move the patient from a lateral (side) position to a supine position.
- For the patient on his side, remove supportive pillows.
- Fold the top bedding back to the hips, being careful to avoid any undue exposure to the patient's body.
- With one hand on the patient's shoulder and on the hip, roll this body in one piece (like a log) over onto his back.

**Body Alignment**

- Align the patient's body in a good position.
- The head, neck, and spine are in a straight line.
- Arms are at the patient's sides (parallel to the body) with hands prone.
- Legs are parallel to his body.
- Hips, knees, and feet should be in good alignment.

**Support Body Parts**

- Support the body parts in good alignment for comfort.
- Place a pillow under the head and shoulders to prevent strain on neck muscles and hyperextension and flexion of the neck.
- Support the small of the back with a folded bath towel or small pillow.
- Put a footboard at the foot of the bed and place the feet flat against it (at right angles to the legs) to prevent plantar flexion ("foot drop").
- Arrange a sandbag along the outer portion.

**Patient Comfort and Safety**

***Provide for the patient's comfort and safety of the adult patient as follows;***

- Replace the bedding neatly and raise the side rails, if used.
- Place the call light within reach.
- Position the bedside stand or overbed table so that the patient will be within easy reach of drinking water and personal items.
- Leave the bed in a low position.
- Report significant nursing observations to the charge nurse.

**Techniques and Actions in Ambulating the Adult Patient**

***The following actions can minimize Patient discomfort and promote relaxation:***

- ✓ Obtain comfortable bedding.

- ✓ Allow some of the patient's possessions (such as a pillow or Afghan)
- ✓ Change the bed position (head and knee)
- ✓ Reduce the noise and light in the patient's room.
- ✓ Top covers may be pulled too tightly over the feet and legs.

**Actions to Alleviate Discomfort and Promote Relaxation**

***The following actions can minimize discomfort for the Patient and promote Relaxation are as follows:***

- ✓ Check for mechanical reasons for discomfort:
- ✓ Bed linens or Chux® which are gathered and wrinkled under the patient.
- ✓ Plastic mattress covers that wrinkle and cause pressure.
- ✓ The Patient lying on tubes, drains, syringe caps, or other equipment.
- ✓ Nonfunctioning equipment, including alarms sounding without cause.

**Positioning the Adult Patient to promote Sleep and Relaxation**

***If a patient is restless, having difficulty getting comfortable, or not sleeping well, consider the following steps:***

- ➢ Wash your hands.
- ➢ As always, be sure to have a physician's order for the patient to be turned in when necessary.
- ➢ Approach and identify the patient (by checking the ID band) and explain the procedure (using simple terms and pointing out the benefits).

***Additionally, if a patient is restless, having difficulty getting comfortable, or not sleeping well – consider the following steps.***

- ✓ Perform practical nursing care to promote relaxation.
- ✓ Straighten or change the linens.
- ✓ Give the patient a back massage.
- ✓ Provide oral hygiene.
- ✓ Administer hair care.
- ✓ Administer a sponge bath and get fresh pajamas.

***Other important steps to ensure Patient comfort and promote sleep and Relaxation are as follows:***

- Position the patient in the preferred position for rest if possible.
- Follow the physician's order for turning if specified.
- Modify the position for support and comfort.
- Use aids for the patient's positioning as indicated.
- Check for the position and function of tubes and drains.

***Actions to ensure Bed comfort of the patient in promoting Sleep and Relaxation are as follows:***

- Check the bed linens for comfort.
- Wrinkles in linens.
- Wrinkles in a mattress cover.
- Tightness over the feet and lower extremities.
- Tell the patient when you plan to return.
- Position the call light and bedside table within easy reach

*Note: To keep the call light within the patient's reach, secure it to the bed linen with a safety pin, if necessary.*

***Additional points to note in promoting comfort, sleep, and relaxation for the Adult Patient are as follows:***

- Close the doors.
- Turn off any radios on TV.
- Ask unnecessary visitors and personnel to leave the area.
- Avoid interrupting the patient once he falls asleep.
- Schedule medications for times when the patient is being turned.

- Keep nursing care treatments and procedures to a minimum during sleep hours.
- Report and record significant nursing Observations.

***The following procedure should be applied if the patient collapses:***

- Assume a broad stance with one foot slightly forward, grasp the patient firmly at the waist or under the axilla, and allow him to slide down against your leg.
- Ease the patient slowly to the floor using your body as an incline.
- Lower your body along with the patient, if necessary.
- Utilize proper body mechanics.

***The following procedure applies to secure a patient who loses balance:***

- Attempt to stabilize the patient by bracing him against you.
- Guide the patient to the bedside or chair, if possible.
- If a fall begins to occur, guide him slowly toward the floor.
- The physiological and physiological benefits of repositioning, being out of bed, and sitting up or ambulating should not be under-emphasized.
- Basic nursing care activity such as this, although not always pleasant for the patient, does make a significant difference in the recovery and return to the health of the patient.